

10/10/2011 10:10:10 AM

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names, addresses, and telephone listings, unless

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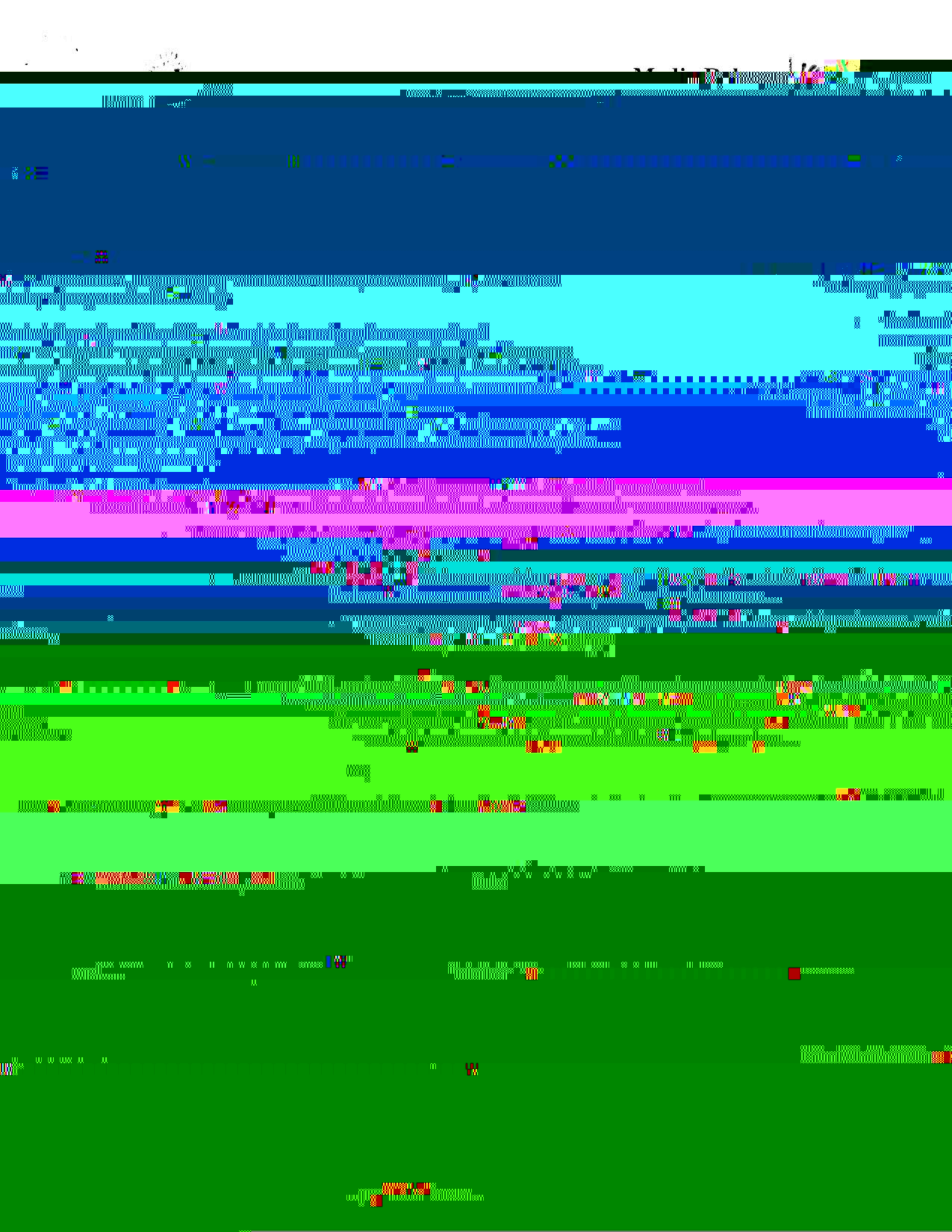
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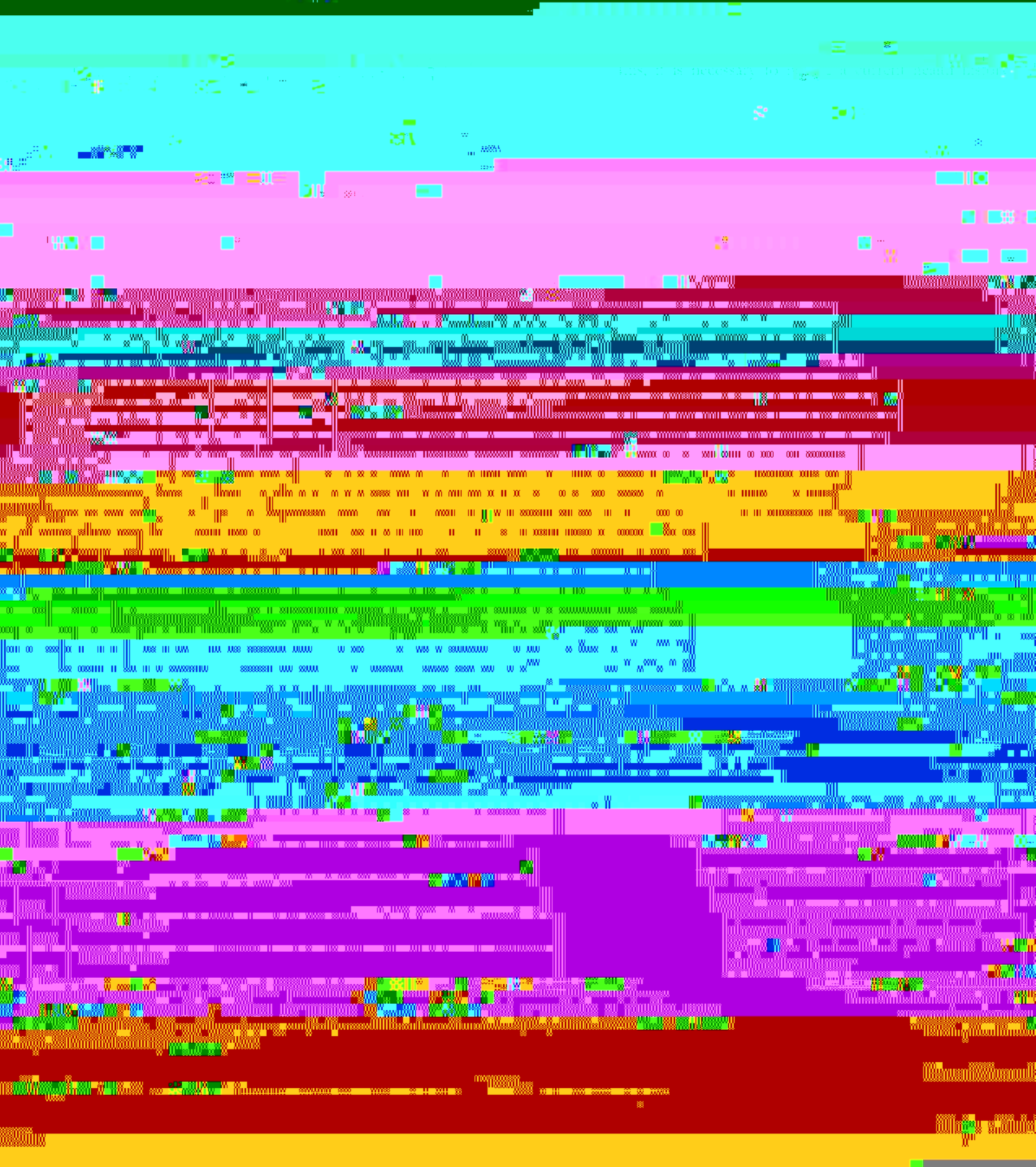
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When the District is required to obtain your express consent, please check YES for each method listed below in which the District may contact you by the following options:

Home phone	YES
Work phone	YES
Cell phone	YES
Text message	YES
Direct mail	YES
Other	YES

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

Parent/Guardian Name (please print) \_\_\_\_\_

YES NO

Can my house \_\_\_\_\_

Number: \_\_\_\_\_

Call my cell phone \_\_\_\_\_

Number: \_\_\_\_\_

Send me a text message \_\_\_\_\_

Direct: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Signature: Date: \_\_\_\_\_



Date/Per

Student

Please Print/ Favor